

POLITICAL ACTION COMMITTEE OR LEGISLATIVE CAUCUS COMMITTEE STATEMENT OF ORGANIZATION

State Form 28251 (R8/11-05) Indiana Election Commission (IC 3-9-1-3 and IC 3-9-1-4)

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE

				FILE	NUMBER	
1. IS THIS AN AMENDMENT? No Yes If Yes, please	enter the file r	umber in th	his box \rightarrow			
SECTION A. COMMITTEE INFORMATION: Fill in all a	annlicable be	xes as full	v and accu	rately as no	esiblo	
Chook ii iiis is a new haire			3. Acronym or Abbreviated Name (if any)			
MIBOR POLITICAL ACTION COMMITTEE 4. Mailing Address (Address where all campaign finance correspondence is received)			MPAC			
Check if this is a new address (Address (Address (Optional)) Check if this is a new address (Optional)						
1912 N Meridian Street 6. City State ZIP Code 7. FAX (Op)	ational)	8. Telephone			-	
IANAPOLIS IN 46202				9. Committe	9. Committee Organization Date (MM-DD-YY) 12-16-93	
40 to 44 is a second sec						
12. State the purpose of the committee and on which issues the committee	11. Is this commi	ttee a "Legislativ	re Caucus Commit	tee" under IC 3-5-2	2-27.37 🔲 Yes 🔳 No	
KRAL ESTATE WOUSTON FLONDING DOLL	244E4 IT	1011:	(-NIED)	ME IT		
LID. NAME AND AND LOSS OF ANY CONDUCTED ATTILISTED CONCORROR OF CONTRACTOR ASSESSMENT	14. Is this committ	e supporting a	colition portula par	in tintuto [] v		
group, or individual. 14. Is this committed properties of the party affilial check party affilial committees.			tion if applicable: Democratic Libertarian Republican			
15. If supporting or opposing a public question, state both the subject of the question ANI			The publican			
15. If supporting or opposing a public question, state both the subject of	the question ANI	the committe	ee position.			
16. Chairperson's Name Check if this is a new chairperson		17. E-mail Address (Optional)				
Kobert Lewis		, E-mail Ac	idiess (Optiona	,		
18. Mailing Address Check if this is a new address		19. Telephone (Day)		20. Teleph	20. Telephone (Evening)	
1912 N. MERIDIAN ST., INDIANAPOLIS, IN 46202		(317) 259-6000		1		
21. Treasurer's Name		(517) 259-6000 (317) 216 - 5700				
Steve Sullivani 23. Mailing Address						
23. Mailing Address		24. Telephone (Day) 25. Telephone (Evening)			one (Evening)	
MIQ N. Meridium St., INDIANAPOUS II	N46202	(317) 956-1912 (317		1590-0836		
26. Custodian of Records' Name Check if this is a new custodian		27. E-mail Address (Optional)		70,000		
PATRICK CLINE 28. Mailing Address Check if this is a new address						
20. Mailing Address		29. Telephone (Day)		30. Telepho	30. Telephone (Evening)	
1912 N Meridian St., Indianapolis, IN 46	1202	(3i7)9	56-1912	(317	1362-2645	
31. Bank or Other Depositories (List all banks or other depositories in which the o	committee deposits	funds, holds acc	counts, rents safe	ty deposit boxes	or maintains funds.)	
SECTION B. APPOINTMENT OF TREASURER (IC 3-9-1						
			Signature of	he Committee of		
32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Sheve Sullivan			Signature of the Committee Chairperson			
Committee.	DULLIVA	\sim	K	un 6	4 .	
SECTION C. ACCEPTANCE OF APPOINTMENT (IC 3-9-3. I give notice that I accept the duties and responsibilities of Treasure	-1-15)					
am not the chairperson of any other campaign finance committee	rer of this Comm	nittee.		FOR OFFIC	E USE ONLY	
4. Typed or Printed Name of Treasurer Signature of Treasurer		Date (MM-D	D-YY)	2 2		
Steve Sullivan Steph A.	el-	3-31-	09	Elina NA	- از آلا الم	
SECTION D. CERTIFICATION OF STATEMENT				- guver	of white	
o the best of my knowledge and belief it is true, correct and complete.					03 2009	
5. Typed or Printed Name of Chairperson Signature of Chairperson		Date (MM-D)	2-77)			
Robert J. Lewis B. Duns	4'	3/3//8	G	FI	LED	
arning: Any information contained in this statement may not be copied for sale or used for quires that any change in this information must be reported within 10 days of the change. (IC 3.	7 Q 1 10) A noman wha	. l	4. 11 (1	• •		
port commits a Class D felony. (IC 3.14-1-13) A person who fails to file a complete or accur	rate report as require	by the Indiana	rraudulent Campaign			